

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS AA (AMBULATORY)

Facility Information

Facility Name: TRANSITION HOUSE II (310567)

Address: 5905 19TH AVE, KENOSHA, WI 53140

License Status: REGULAR

Licensed/Certified/Registered 01/01/1986

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0092109 **End Date:** 02/12/2004 **Type:** STANDARD **Purpose:** SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0090679 **End Date:** 07/10/2003 **Type:** OTHER **Purpose:** COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10006816 Served 07/29/2003

Deficiencies Cited
83.53(4)(b)

Subject Area
HANDRAILS

Compliance
Verified
02/12/2004

Corrected
Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
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Complaint History

Date Complaint Received: 06/12/2003

Date Investigation Completed: 07/10/2003

Subject Area(s)

HOMELIKE ENVIRONMENT & CLEANLINESS

Result

SUBSTANTIATED

SOD #

NOT RECORDED

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